LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

To Be Filed By:

LOBBYISTS (Sec. 67-6619)

Page of Page(s)
THIS SPACE FOR OFFICE USE ONLY

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(Type or print clearl	y in black ink)			ن. ص	STATE OF	GESTATE IDAHO					
See instructions at b Lobbyist's name and permanent business ac	ottom of page	Date prepared		red	Per	Period covered [X] year ending (Mo.) (Day) (Yr.) [7] 3[8]					
P.O. BOX 183	Po126 IV 83.	701		1.27.2006							
Item 1 Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.											
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity *	Total Amount for Item	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)									
Do Not Have to be Reported	All Employers E	mployer No.	1 Emp	loyer No. 2	Employer No. 3	Employer No. 4					
Entertainment Food and Refreshment \$	s s s		\$		\$	_ \$					
Living Accommodations	0	O	_								
Advertising	<u> </u>	0	_								
Travel	0	Ø	_			_					
Telephone 0						_					
Other Expenses or Services	6	Ø	_			_					
Total \$	Os _	0	_ \$_		\$	_ s					
*When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1. Item The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office.											
The totals of each expenditure Date	Amount			Names of Legislators & Public Officials in Group							
O	0	0		•							
Continued on attached page(s)											
INSTRU		Item 3	En	nployer(s) Name(s) ar	nd Address(es)						
Who should file this form: Any l 67-6617 Idaho Code.	Section	No.1	hearguat o. Box 2	o2, weired	NVB OF 50400 1, ID 83762						
Filing deadline: Annual report is		No.2									
TO BE FILED WITH: Ben Secretar PO Bo Boise, ID Secretar Phone: (208) 334-285	ļ	No.3		Es.							

Item 4					or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible or for or on behalf of any legislator.						
	Date Amount			Name of Legislator Receiving or Benefited							
	Subject		O proposed legislar	ion, the number of the Senate	T	LEGISLATIVE SUE	LIFCT	IDENTIFICATION			
Item 5	or House Bill, Resolution or other legislative activity in which			LEGISLATIVE SUBJECT IDENTIFICATION							
Subject (from 2.1)	t Code table)	Bill, Re Legislar	es supporting or of solution or Other ive Ident. Number	Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, county Government, special districts Government, state	17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)			
						Employer No. 2 signature Employer No. 3 signature		Date Date			
	CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.					Employer No. 4 signature		Date			